

Armed Forces College of Medicine AFCM



Tem ral& Infratemporal Fossa

By professor DR Shahira Youssef

INTENDED LEARNING OBJECTIVES (ILO)



By the end of this lecture the student will be able to:

- Describe muscles of mastication attachments, actions & nerve supply
- 2. Discuss structure, movements and nerve supply of temperomandibular join MJ).
- 3. Correlate structure with clinical dislocation

Key features



- 1. Action & nerve supply of muscles of mastication
- 2. Movements and nerve supply of temperomandibular joint (TMJ).

Temporal fosssa

Neuroscience module

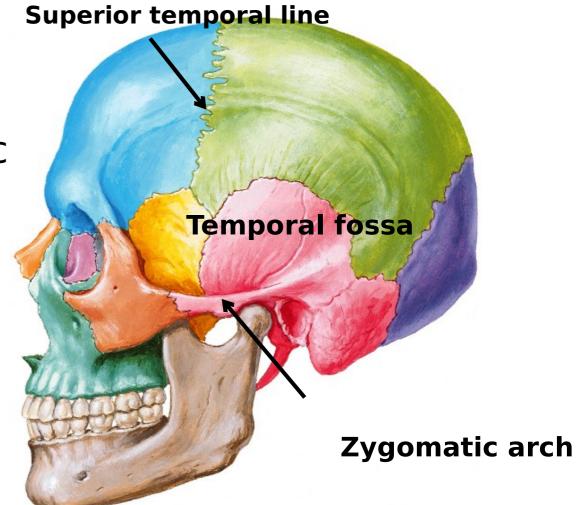


Temporal fossa:

Contents:

1- Temporal fascia

2- Temporalis :a muscle of mastic



Temporal fascia

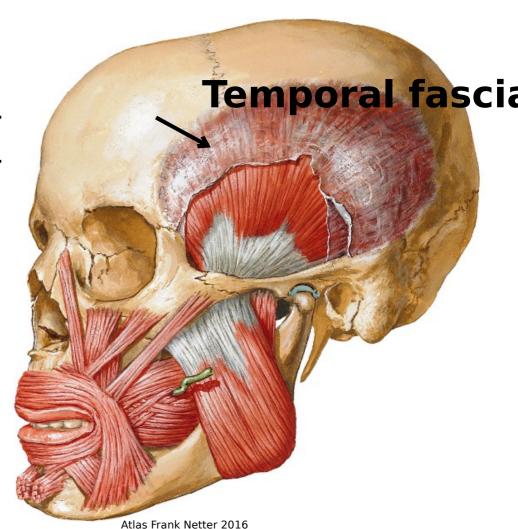


Temporal Fascia

A layer of fascia

attached above to superior tempor

below to the upper border of zygor



Temporalis



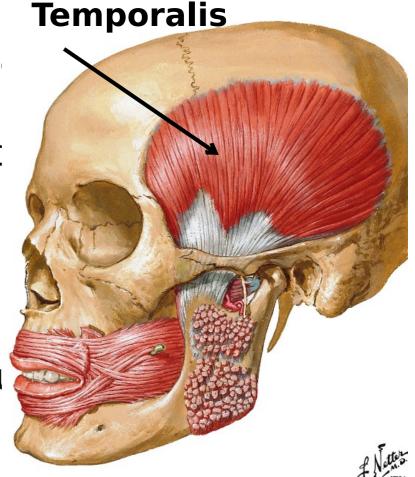
Origin:

floor of temporal fossa and temporal fas-Insertion:

- all aspects of coronoid process except lateral
- anterior border of ramus of mandible till last molar

Action:

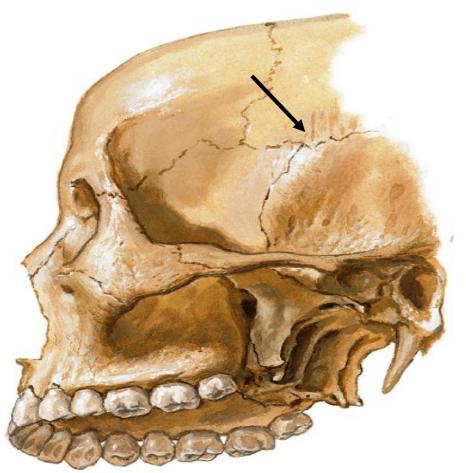
- Elevation of mandible (antigravity mu
- ☐ Retraction of mandible by posterior horizontal fibers



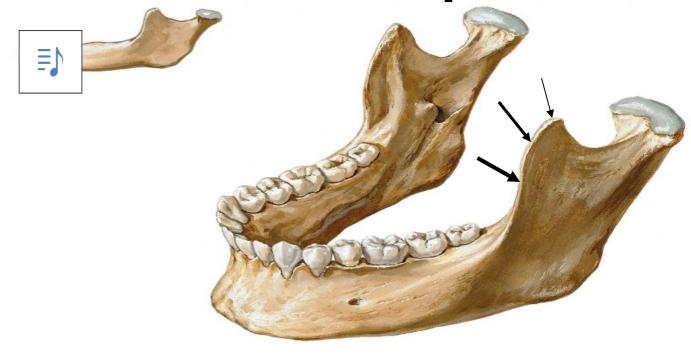
Temporalis

THE CHARGE

Floor of temporal fossa



Coronoid process



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Masseter



Origin:

Superficial head:

anterior two thirds of lower border of zygomatic arch

Deep head:

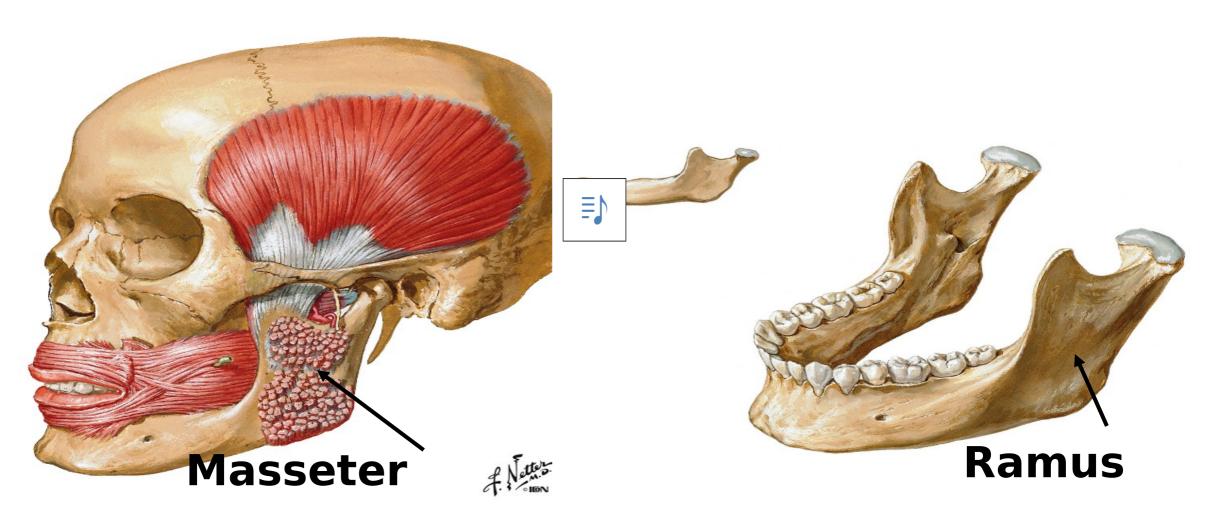
posterior one third of lower barder of zygomatic arch Insertion: lateral surface of nus

Action:

- 1. elevation by deep vertical fibers
- 2. Protrusion by superficial oblique fibers

Masseter





Lateral pterygoid



• Origin:

Upper head:

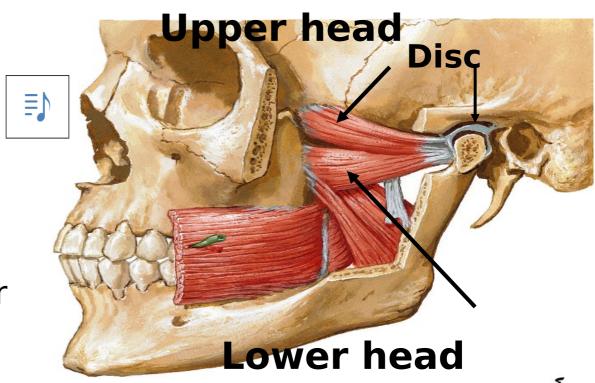
infratemporal surface & crest of greater wing of sphenoid bone

Lower head:

lateral surface of lateral pterygoid plate

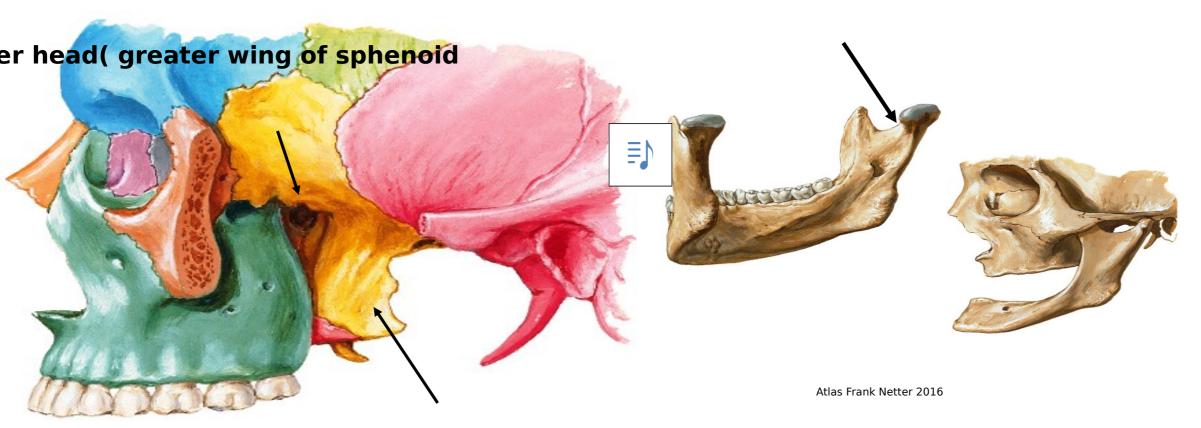
• Insertion:

front of neck, capsule & articular disc of tempermandibular joint



Lateral pterygoid

Front of neck



Lateral pterygoid plate

Neuroscience module

Action of lateral pterygoid



Action:

- 1. Depression of mandible
- 2. Protrusion of mandible
- 3. Side to side movement: medial and lateral pterygoid of one side act together pust andible to opposite side when acting alternatively h muscles of the opposite side they produce side to side movement

Medial pterygoid



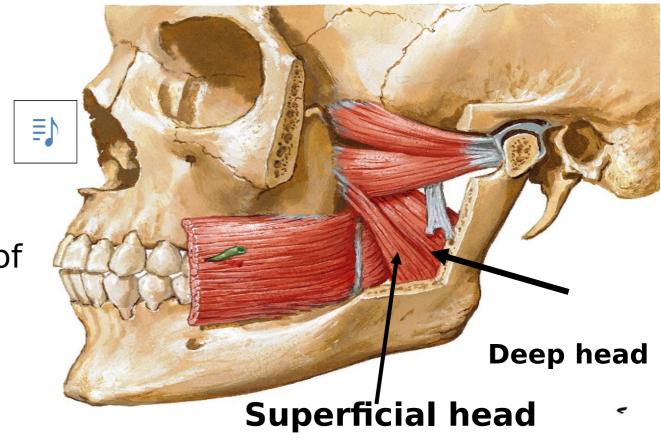
Origin

Superficial head: maxillary tuberosity

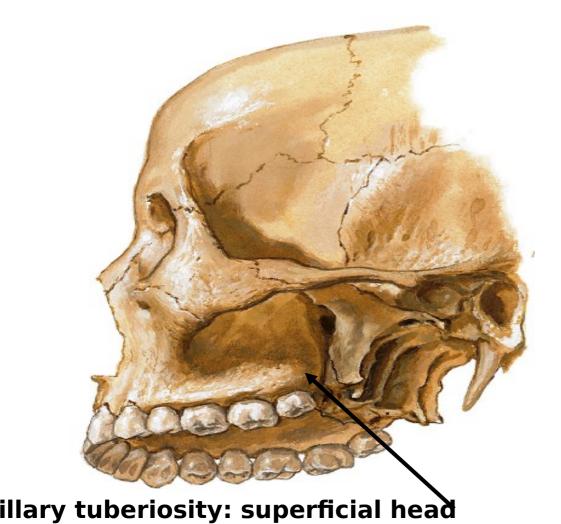
Deep head: medial surface of lateral pterygoid plate

 Insertion: medial surface of angle of mandible

 Action : elevation, protrusion of mandible & side to side movements



Medial pterygoid



insertion :Angle of mandible

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Nerve supply



 All muscles of mastication are supplied by anterior division of mandibular nerve except medial pterygoid from trunk of mandibular ve (MCQ)

Questions

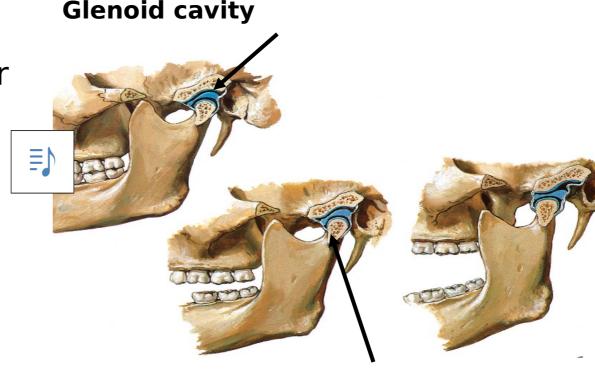


- Which muscle depresses mandible
- ☐ Which muscles protrude mandible
- Which muscles of mastication are present in infratemporal fossa

Temporomandibular joint TMJ



- Type: Synovial <u>condylar</u> joint
- it is formed by articulation of head of mandible & mandibular fossa and articular tubercle
- Articular surface is covered by fibro- cartilage
- Capsule is attached to the margins of articular surface
- Synovial membrane lines fibrous capsule

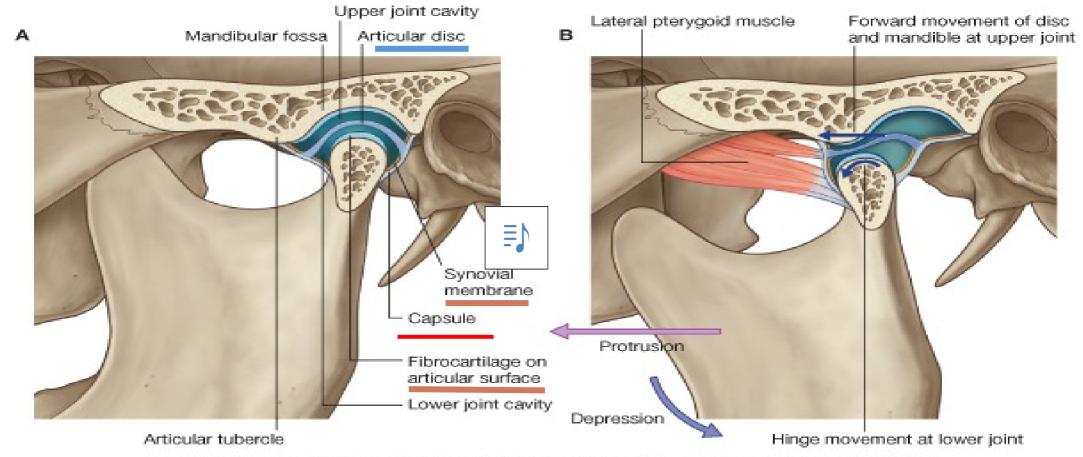


Head

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Temporomandibular joint TMJ



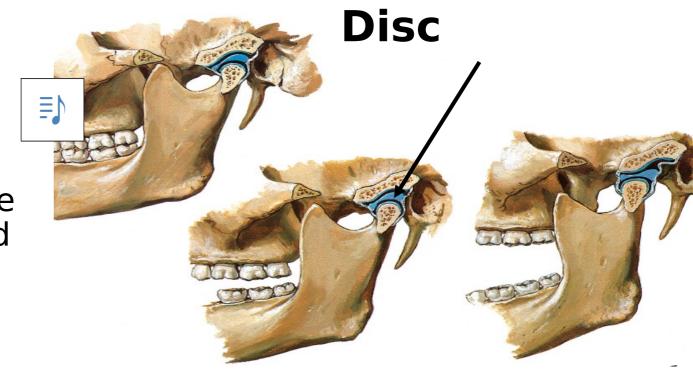


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Articular disc



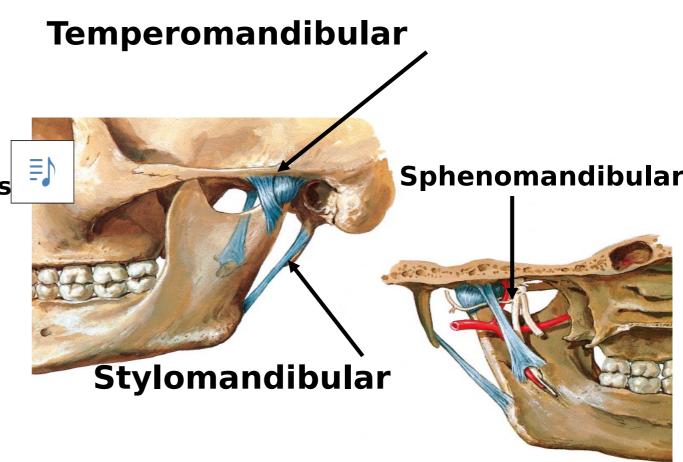
- It is made of fibrocartilage
- Upper surface is concavo convex
- Lower surface is concave
- Divides the joint into upper & lower compartments
- It is attached to fibrous capsule and tendon of lateral pterygoid and head of mandible.



Ligaments of TMJ



- Lateral ligament:
- Extends from tubercle of zygomatic arch to lateral side of neck (lateral)
- Strongest ligament & prevents posterior dislocation
- Stylomandibular:
- Extends from Apex of styloid process to Angle of mandible(posterior)
- it is a condensation of deep fascia (investing layer).
- Sphenomandibular:
- Extends from spine of sphenoid to lingula (medial)
- > It is an embryological remnant



TMJ



- The strongest ligament of TMJ is.....
- Sphenomandibular liament is attached to
- Articular disc is made of

Movements of TMJ



- Protrustion: both lateral and medial pterygoid.
- ☐ **Retraction**: by temporalis
- Depression: by lateral pterygoid
- ☐ **<u>Elevation</u>**: masseter, medial pterygoid and temporalis
- Side to side movement: dial and lateral pterygoid of one side alternating with other side

Nerve and blood supply



Nerve supply

- Auriculotemporal nerve
- Nerve to masseter for proprioception

Blood supply:

- Superficial temporal
- Maxillary artery



Applied Anatomy

Dislocation is prevented posteriorly by lateral temperomandibular ligament protecting external auditory meatus

Dislocation is common anterior

Questions



- 1. All muscles of mastication are supplied by Except...... By
- 2. The only retractor of mandible is.....
- 3. The main depressor is...4. Side to side movements
- 4. Side to side movements done by.....
- 5. The strongest ligament of TMJ is.....
- 6. A ligament of TMJ derived from fascia is....
- 7. Dislocation is common in the following direction.....

SUGGESTED TEXTBOOKS



1. Clinical anatomy by regions by Richard Snell

